

STATE OF INDIANA )  
 ) SS:  
COUNTY OF MARION )

BEFORE THE INDIANA  
COMMISSIONER OF INSURANCE

CAUSE NO.: 7639-AG09-0323-063

IN THE MATTER OF: )

Beth L. Baker, )

2628 W COUNTY ROAD 650 S )

LIBERTY Indiana 47353-8459 )

License Number: 2434380 )

Respondent )

Type of Agency Action: Enforcement )

**FILED**

MAR 31 2009

STATE OF INDIANA  
DEPT. OF INSURANCE

**FINAL ORDER AND APPROVAL**

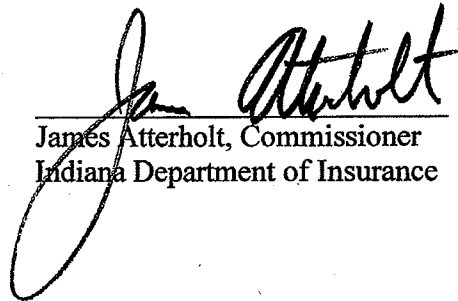
The Indiana Department of Insurance (the "Department") and Beth L. Baker, individually and as owner of Union County Title Company, LLC ("Union County"), signed an Agreed Entry which purports to resolve all issues involving the unlicensed practice of Union County, and which has been submitted to the Commissioner of Insurance ("Commissioner") for approval.

The Commissioner, after reviewing the Agreed Entry, finds it has been entered into fairly and without fraud, duress or undue influence, and is fair and equitable between the parties. The Commissioner hereby incorporates the Agreed Entry as if fully set forth herein, and approves and adopts in full the Agreed Entry as a resolution of this matter.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by the  
Commissioner of Insurance:

1. Respondent, Beth L. Baker, shall pay a civil penalty of \$2,080.00 to the  
Department within 20 days of this Final Order.

ALL OF WHICH IS ORDERED this 31 day of March, 2009.

  
James Atterholt, Commissioner  
Indiana Department of Insurance

Distribution:

Beth L. Baker  
2628 W COUNTY ROAD 650 S  
LIBERTY Indiana 47353-8459

Kathy Carr Hulbert  
INDIANA DEPARTMENT OF INSURANCE  
311 West Washington Street, Suite 300  
Indianapolis, Indiana 46204-2787

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STATE OF INDIANA  
DEPT. OF INSURANCE

**AGREED ENTRY**

This Agreed Entry is entered into by Kathy Carr Hulbert, Attorney for and on behalf of the State of Indiana, Department of Insurance ("Department"), and Beth L. Baker ("Baker"), individually and as owner of Union County Title Company, LLC ("Union County").

This Agreed Entry is subject to the review and approval of James Atterholt, Commissioner of the Indiana Department of Insurance.

WHEREAS, Baker has held an Indiana insurance producer license and conducted title insurance business as a sole proprietor in Indiana since August 1994.

WHEREAS, Baker organized her title agency under the name, Union County Title Company, LLC, on March 1, 2004.

WHEREAS, Baker conducted title insurance business as Union County and paid commissions for title insurance-related services to Union County for more than four years without the proper licensure for her title agency.

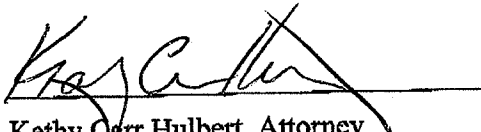
WHEREAS, Baker failed to license Union County as an Indiana insurance producer until December 2, 2008.

WHEREAS, the Department and Baker desire to resolve their differences and settle the issues without a hearing;

IT IS THEREFORE, NOW AGREED by and between the parties as follows:

1. This Agreed Entry is executed voluntarily by the parties.
2. Baker voluntarily and freely waives her right to a public hearing on the issues in this action.
3. Baker waives her right for a judicial review of this matter.
4. The Commissioner of the Indiana Department of Insurance has jurisdiction over the subject matter contained in this document and the persons and entities listed in this document.
5. Baker shall pay a civil penalty of \$2,080.00 to the Department within 20 days of the Commissioner adopting this agreement.

3/25/09  
Date Signed

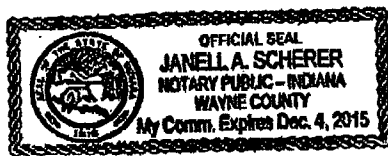
  
Kathy Carr Hulbert, Attorney  
Indiana Department of Insurance

3/24/09  
Date Signed

Beth L. Baker  
Beth L. Baker, individually and as  
Owner of Union County Title Company, LLC

STATE OF INDIANA                    )  
  ) SS:  
COUNTY OF Union                    )

Before me a Notary Public for Wayne County, State of Indiana, personally  
appeared Beth L. Baker and being first duly sworn by me upon his oath, states that the facts alleged in the  
foregoing instrument are true. Signed and sealed this 24<sup>th</sup> day of March, 2009.



Janell A. Scherer  
Notary Signature  
JANELL A. SCHERER  
Notary Name Printed

My Commission expires: \_\_\_\_\_

County of Residence: \_\_\_\_\_